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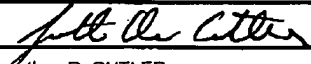
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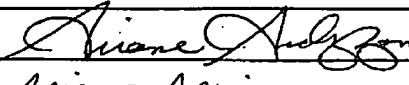
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<b>TRANSMITTAL FORM</b>  (to be used for all correspondence after initial filing)	Application Number	10/634,913
	Filing Date	6-AUG-2003
	First Named Inventor	BERTHIAUME, Yves
	Art Unit	3617
	Examiner Name	AVILA, Stephen P.
	Attorney Docket Number	RP-01118-US2
Total Number of Pages in This Submission		17

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers  <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input checked="" type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<b>Remarks</b> - Credit Card Form (PTO-2038) - Statement Under 37 CFR 3.73 (b)		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	Bombardier Recreational Products Inc.		
Signature			
Printed name	Jonathan D. CUTLER		
Date	December 14, 2004	Reg. No.	40,576

CERTIFICATE OF TRANSMISSION/MAILING			
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:			
Signature			
Typed or printed name	ARIANE ARBIZZON	Date	DECEMBER 14, 2004

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11 P R 1995

Effective on 12/08/2004.  
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

# FEE TRANSMITTAL

## For FY 2005

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 1,020

### Complete if Known

Application Number 10/634,913  
Filing Date August 6, 2002  
First Named Inventor BERTHIAUME, Yves  
Examiner Name AVILA, Stephen P.  
Art Unit 3617  
Attorney Docket No. RP-01116-US2

### METHOD OF PAYMENT (check all that apply)

☐ Check ☒ Credit Card ☐ Money Order ☐ None ☐ Other (please identify):  
☒ Deposit Account Deposit Account Number: 502973 Deposit Account Name: Bombardier Rec. Prod. Inc.

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee  
☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

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### FEE CALCULATION

#### 1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	\$0
Design	200	100	100	50	130	65	\$0
Plant	200	100	300	150	160	80	\$0
Reissue	300	150	500	250	600	300	\$0
Provisional	200	100	0	0	0	0	\$0

#### 2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent	50	25
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent	200	100
Multiple dependent claims	360	180

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims	Fee (\$)	Fee Paid (\$)
- 20 or HP =	0	\$0	\$0			
HP = highest number of total claims paid for, if greater than 20						
Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)			
- 3 or HP =	0	\$0	\$0			
HP = highest number of independent claims paid for, if greater than 3						

#### 3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
0 - 100 =	0	0.0 (round up to a whole number) x	\$250	\$0

#### 4. OTHER FEE(S)


Non-English Specification, \$130 fee (no small entity discount)

Other: Extension for Reply within Third Month (1020.00)

Fees Paid (\$)

1020.00

#### SUBMITTED BY

Signature  Registration No. 40,576 Telephone 514-732-7050  
Name (Print/Type) Jonathan D. CUTLER Date December 14, 2004

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**Bombardier Recreational Products Inc.**

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December 14, 2004

DEC 14 2004

Commissioner of Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

**RE: UNITED STATES PATENT APPLICATION**

<b>Serial No.:</b>	<b>10/634,913</b>
<b>Title:</b>	<b>WATERCRAFT COMPENSATION SYSTEM</b>
<b>Inventors:</b>	<b>BERTHIAUME, Yves</b>
<b>Filing Date:</b>	<b>August 6, 2002</b>
<b>Examiner:</b>	<b>AVILA, Stephen P.</b>
<b>Art Unit:</b>	<b>3617</b>
<b>Confirmation #:</b>	<b>6485</b>
<b>Our Ref.:</b>	<b>RP-01116-US2</b>

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Sir:

In response to the Office Action dated June 28, 2004, the date for which a response is due on December 28, 2004, with a three-month extension of time, please amend the above identified application as follows:

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